Case 1:05-cv-11104-MLW Document 10 Filed	10/14/2005	5 Page 1	of 2	
U.S. Department of Justice United States Marshals Service To The PROCESS See Instructions on the reverse	RECEIPT for "Service of of this form.	of Process by the	URN e U.S. Marshal"	
PLAINTIFF PLAINTIFF		RT CASE NUMB		_
DAVID WILLIAMS, PRO JE	TYP	E OF PROCESS	of-MIW	
SERVE (NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR				F
SHERRY ELLIOTT	C DESCRIPTION			_
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT Code Code	MA C	02071-01	2207	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	- Number of pr			-
		nis Form - 285	1.	_
Mr. David Williams P.O. Box 100	Number of pa served in this		6	
1 Sd. WAIPSIE MA 02071-0100 !		vice		~
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING Telephone Numbers, and Estimated Times Available For Service);	SERVICE (Incl.	ude Business and	Alternate Addresses, All	-
Fold a			Fol	<u>d</u>
- PERSOLIAI CAPACITO United States Postal SERVICE				
Vented States Postal SERVICE				
				_
Signature of Attorney or other Originator requesting service on behalf of: DAV. A. W. II. Ams. DAD SE PLAINTIFF DEFENDANT	TELEPHONE		Aveliet 25	à٦
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO	NOT WR	RITE BELO	W THIS LINE	•
I acknowledge receipt for the total number of process indicated. Total Process District District Signature of Author of Origin to Serve	rized USMS Dept	ity or Clerk	Date	•
(Sign only first USM 285 if more than one USM 285 is submitted) No. 38 No. 38	, Iala	uu /	9/14	75
I hereby certify and return that I \sum have personally served, \subseteq have legal evidence of service, \subseteq have es on the individual, company, corporation, etc., at the address shown above or on the individual, company				-
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc.	•			-
Name and title of individual served (if not shown above)			suitable age and dis- esiding in the defendant's	-
Address (complete only if different than shown above)		usual place of Date of Service		_
			pn	
		Signature of U.S.	Marshal or Deputy	-
Service Fee Total Mileage Charges (including endeavors) Forwarding Fee Total Charges Advance Deposits	Amount owed to	U.S. Marshal or	Amount of Refund	-
REMARKS: peruel by Cut Ward 4/15/05 At				-
PDIOD EDITIONS		EODIA	ICM 205 (D. 1275/00	_
PRIOR EDITIONS MAY BE USED 1. CLERK OF THE COURT		FORM I	USM-285 (Rev. 12/15/80)	,

UNITED STATES DISTRICT COURT			
EASTERN	District of MASSACHUSETTS		
DAVID WILLIAMS, PRO SE Plaintiff,	SUMMONS IN A CIVIL CASE		
V.	SUMMONS IN A CIVIL CASE		
SHERRY ELLIOTT in her personal capacity, Defendant.	05 1 1 1 0 4 MLV		
TO: (Name and address of Defendant)	Sherry Elliott P.O. Box 100,		
	So. Walpole, MA 02071-0100		
•	·		
YOU ARE HEREBY SUMMONED and	required to serve upon PLAINTIFF'S ATTORNEY (name and address)		
	David Williams, pro se w-42189		
	P.O. Box 100, So. Walpole, MA 02071-0100		
	30. Walpole, MA 020/1-0100		
	and a second state of the second seco		
ver to the complaint which is herewith serv	red upon you, within 20 days after service of the life you fail to do so, judgment by default will be taken against you		
	atso file your answer with the Clerk of this Court within a reaso		

DATE

SARAH A. THORNTON

CLERK

(By) DEI GT